

PTO/SB/21 (09-04)

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TRANSMITTAL
FORM

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Total Number of Pages in This Submission

2 pgs.

| | | |
|------------------------|-----------------------|--------------------|
| Application Number | 10/808,889 | RECEIVED |
| Filing Date | March 25, 2004 | CENTRAL FAX CENTER |
| First Named Inventor | François CLERC et al. | |
| Art Unit | 1626 | AUG 22 2005 |
| Examiner Name | LEE, Susannah E. | |
| Attorney Docket Number | ST01027 US CNT | |

| ENCLOSURES (Check all that apply) | | |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div> |
| <div style="border: 1px solid black; height: 10px; width: 100%;"></div> Remarks 1. Enclosed Issue Fee - 1pg. | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|------------------------------|----------|--------|
| Firm Name | AVENTIS PHARMACEUTICALS INC. | | |
| Signature | <i>Balaram Gupta</i> | | |
| Printed name | Balaram Gupta | | |
| Date | August 22 2005 | Reg. No. | 40,009 |

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: (USPTO FAX NO. 571-273-2885 : Total No. of Pages Transmitted: 2 pgs)

| | | | |
|-----------------------|-----------------------|------|---------|
| Signature | <i>Maribel Mendez</i> | | |
| Typed or printed name | Maribel Mendez | Date | 8-22-05 |

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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005487 7590 07/12/2005

ROSS J. OEHLER
 AVENTIS PHARMACEUTICALS INC.
 ROUTE 202-206
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Maribel Mendez (Depositor's name)
Maribel Mendez (Signature)
 8-22-05 (Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/808,889 | 03/25/2004 | Francois Clerc | ST01027US CNT | 7466 |

TITLE OF INVENTION: SUBSTITUTED BENZIMIDAZOLE COMPOUNDS AND THEIR USE FOR THE TREATMENT OF CANCER

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|-----------------|--------------|----------------------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 10/12/2005 |
| EXAMINER | ART UNIT | RECEIVED OIPE/IAP | | | |
| LEE, SUSANNAH E | 1626 | AUG. 23 2005 | | | |
| | | 514-235200 | | | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Balaram Gupta

1. _____
2. _____
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recognition as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

08/23/2005 HDEMESS2 00000067 181982 10808889

(A) NAME OF ASSIGNEE

Aventis Pharma S. A.

Reel/Frame: 014819/0387

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Antony, France 01 FC:1501 1400.00 DA

02 FC:1504 300.00 DA

Dated: July 6, 2004 03 FC:8001 9.00 DA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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 Advance Order - # of Copies 3

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5. Change in Entity Status (from status indicated above)

 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Balaram Gupta
 Typed or printed name Balaram Gupta

Date August 22, 2005
 Registration No. 40,009

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